

NOTICE TO ALL DISTRICT AND MUNICIPALITY SOLID WASTE COLLECTORS

Chapter 48, Sections 19-30, of the Montgomery County, Maryland, Solid Wastes Law, requires anyone transporting solid wastes' within Montgomery County, Maryland, are licensed. Enclosed are the necessary forms and instructions. The following is a list of licensing requirements. If you have any questions, please contact the Licensing Department at 240-777-6566.

The following documentation is required to apply for a license.

- ✓ Application Forms. These forms must be completed and signed by the applicant or the applicants Agent.

Business Address: The office must be located in Montgomery County or you must provide a local telephone number or a toll-free telephone number.

Corporation Papers. If incorporated, a copy of your corporation papers must be submitted with current names and address of officers, secretaries and resident agent.

- ✓ Affidavit. Must be completed and signed
- ✓ A copy of the State Vehicle Registration Card must be submitted for each vehicle that you wish to permit.
- ✓ Vehicle Inspection: Please refer to the enclosed inspection criteria to pre-inspect you vehicle and *ENSURE ALL CRITERIA IS COMPLETE AND FUNCTIONING PRIOR TO BRINGING YOUR VEHICLE IN FOR INSPECTION*. Vehicle inspections are performed by the Division of Solid Waste Services officials at the Montgomery County, Maryland, Solid Waste Transfer Station (located at 16101 Frederick Road, Rockville, Maryland); Monday through Friday from 8:00 a.m. to 4:00 p.m. Inspections will not be conducted if the tarmac is wet, or if rain, snow, or sleet is falling. Vehicle inspections are valid for 30 days ONLY. If license and vehicle registration are not issued within 30 days the vehicle must be re-inspected.

Expirations. Solid Waste Collector licenses expire one (1) year from the date of issuance. Vehicle permits will expire the SAME day as the Solid Waste Collector License.

Solid Wastes Law. You are responsible for following the provisions of Montgomery County, Maryland, Solid Wastes Law; located on www.amlegal.com/montgomery_county_md/. (click on NO FRAMES). Do a search for Chapter 48. Please note that Chapter 48 is mailed only upon request.

Hauler/Collector Annual Solid Waste/Recycling Report. This data, required by the State of Maryland, must be submitted reporting all tonnage deposited in and outside of Montgomery County, Maryland. **Contact Theresa Sounders at 240-777-6425.**

Solid Waste Disposal Account. If you can guarantee that you will be disposing at least 20 tons per month of solid waste at the Montgomery County, Maryland, Solid Waste Transfer Station you may qualify for a Disposal Account. **For further information contact Jeanne Risher at 240-777-6434.**

*NOTE: If there are any changes to your business information, please update it on the enclosed form. The Licensing Department **DOES NOT** accept incomplete packages. Please follow the check list above to make sure all documents are submitted accordingly. A review of your application will not occur until such time as all information is completed and received in one entire package. The renewal package must be completed and date stamped by our office thirty (30) days prior to the expiration date. Copies must be legible. Faxes will be accepted. **NO EXCEPTIONS***



Montgomery County Department of Environmental Protection
Division of Solid Waste Services
APPLICATION FOR SOLID WASTE PROVIDER LICENSE

Submit form to: 16101 Frederick Road, Derwood, MD 20855

☐ Please Remit a \$25 Application Fee Made Payable to:
Montgomery County Division of Solid Waste Services.

License Type: (For Office Use Only)

Date Received

☐ "A" License ☐ "B" License ☐ "C" License

Business Information

Name of Business	<input type="text"/>		
Trade Name or DBA	<input type="text"/>		
Business Address	<input type="text"/>		
City	<input type="text"/>	State <input type="text"/>	Zip Code <input type="text"/>
Phone Number	<input type="text"/>	Fax # <input type="text"/>	
Mailing Address	<input type="text"/>		
City	<input type="text"/>	State <input type="text"/>	Zip Code <input type="text"/>
Phone Number	<input type="text"/>	Fax # <input type="text"/>	

Owner Information

Last Name	<input type="text"/>	First Name	<input type="text"/>	Initial	<input type="text"/>
Mailing Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>
Phone Number	<input type="text"/>	Fax #	<input type="text"/>	E-Mail	<input type="text"/>

Type of Business - Check One

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> General Partnership	Years in Business	<input type="text"/>
<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Partnership	State of Formation	<input type="text"/>
<input type="checkbox"/> Limited Liability Corporation (LLC)	<input type="checkbox"/> Limited Liability Partnership (LLP)	Date of Formation	<input type="text"/>
<input type="checkbox"/> Business Trust	<input type="checkbox"/> Limited Liability Limited Partnership		

Contact Person for the Business

Last Name	<input type="text"/>	First Name	<input type="text"/>	Initial	<input type="text"/>
Mailing Address	<input type="text"/>				
City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>
Phone Number	<input type="text"/>	Fax #	<input type="text"/>	E-Mail	<input type="text"/>



Montgomery County Department of Environmental Protection
Division of Solid Waste Services
APPLICATION FOR SOLID WASTE PROVIDER LICENSE

Submit form to: 16101 Frederick Road, Derwood, MD 20855

Name(s) of Owner(s), Corporate Officers, Members, or Partners

Name & Title	<input type="text"/>	Phone Number	<input type="text"/>
Address	<input type="text"/>	% of Ownership	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
	Zip Code	<input type="text"/>	E-mail Address <input type="text"/>
Name & Title	<input type="text"/>	Phone Number	<input type="text"/>
Address	<input type="text"/>	% of Ownership	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
	Zip Code	<input type="text"/>	E-Mail Address <input type="text"/>
Name & Title	<input type="text"/>	Phone Number	<input type="text"/>
Address	<input type="text"/>	% of Ownership	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>
	Zip Code	<input type="text"/>	E-Mail Address <input type="text"/>

Please attached additional sheet if necessary for all Name(s) of Owner(s), Corporate Officers, Members, or Partners

RESIDENT AGENT - Required for all Corporations, Limited Liability Companies, Limited Liability Partnerships, Limited Partnerships, and Limited Liability Limited Partnerships

Name & Title	<input type="text"/>	Phone #	<input type="text"/>	Fax #	<input type="text"/>
Address	<input type="text"/>	E-Mail Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>	Zip Code	<input type="text"/>

Provider Statement - In the space provided please provide a brief statement describing the solid waste that will be hauled, collected, or transported. The statement must specify the amount of waste that will be discarded, and the geographical areas from which the solid waste will be hauled.

☐ Commercial Collection

☐ Residential Collection

☐ Multi-Family Collection

I declare and affirm, under penalty of perjury, that to the best of my knowledge, information, and belief, all matters and facts in this application are true and correct and that no false or misleading information has been provided.

Signature of Corporate President, Managing Member, Partner, or Owner Listed on Page 1 of this application

Signed By

Name	<input type="text"/>	Title	<input type="text"/>	Current Date	<input type="text"/>
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Submit by E-mail

Print Form

AFFIDAVIT

State of Maryland
County of Montgomery

_____, being duly sworn, deposes and says that he/she is
Person's Name
over the age of eighteen (18) years, competent to testify to the matters stated, herein, and that the facts and
matters stated herein, are true to the best of his/her knowledge and information.

He/She is employed by or is the owner of _____,
Name of Company/Establishment
a Solid Waste collection company in Montgomery County, licensed under the provisions of Chapter 48,
Montgomery County Code 1994, as amended, and that he/she is responsible on behalf of the company for
complying with all of the provisions required by Chapter 48 as they relate to the collection and
transportation of Solid Wastes; and the licensing and permitting of Solid Wastes collection companies and
vehicles. His/Her title is _____.

He/She states that a copy of the statement of service, as required under Section 48-21(a)(3), Chapter 48,
1994 Montgomery County Code, and as approved by the Director of the Department of Public Works and
Transportation, has in the past been distributed to each existing customer, and that every customer shall be
furnished a statement of service at least once each calendar year.

Signature

Date

SOLID WASTE VEHICLE PERMIT APPLICATION

MONTGOMERY COUNTY GOVERNMENT
Department of Environmental Protection
Division of Solid Waste Services – Licensing Department
16101 Frederick Road, Derwood, Maryland 20855

Licensing Department

Phone: (240) 777-6566

Fax: (301) 840-2385

Fee: \$5.00 (per vehicle)

Business Name: _____

Contact Person: _____ Telephone No: _____

E-mail address: _____

Location of Vehicle: _____

Fleet No. _____ Vehicle Make: _____ Vehicle Type: _____ Year: _____

VIN #: _____ State Tag Number: _____ State: _____

Apportioned: (yes) _____ (no) _____

Signature of Authorized Agent or Owner

Date

NOTES: - Containers must be conspicuously marked with Company name and telephone number.

- Send a typed list of the following information for fleets larger than one vehicle.

- Vehicle must be inspected every year prior to expiration date.

- PLEASE INCLUDE A LEGIBLE COPY OF CURRENT VEHICLE STATE
REGISTRATION ALONG WITH THIS APPLICATION

- EACH VEHICLE MUST BE BONDED FOR \$500.00 NOT TO EXCEED
\$10,000.00 (Haulers are exempt)



Montgomery County Department of Environmental Protection
Division of Solid Waste Services
SOLID WASTE SERVICES VEHICLE INSPECTION

Name of Business or Company _____

Fleet/Vehicle # _____ DOT # (if Applicable) _____

Year _____ Make _____ Color _____ Body Type _____

Vehicle Identification Number (VIN) _____

County Tag # _____ Expiration Date _____

State Tag # _____ Expiration Date _____ STATE _____

Date _____ Date _____

Company Name - 3" Lettering or Larger
(Must be permanent & on both sides)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Company Phone - 3" Lettering or Larger
(Must be permanent & on both sides)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

"Solid Waste" - If Applicable
(Must be permanent & on both sides)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Tailgate Gasket

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Watertight / Leak Proof Body

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Hopper Plugs (If Applicable)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Working Tarp (Open Top Vehicles)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Fluid Leaks

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Safety Lights & Warning Devices

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

State Registration (Current)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Windshield / Glass

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Windshield Wipers (Must be in Working Condition)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Fire Extinguisher (Current Inspection and Accessible)

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Tires

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Mud Flaps

☐ Pass ☐ Fail ☐ N/A ☐ Pass ☐ Fail ☐ N/A

Comments:

(For Office Use Only)

Inspection Date _____ ☐ PASS ☐ FAIL (Re-inspection Required)

Inspector _____

Inspection Date _____ ☐ PASS ☐ FAIL ☐ New Inspection Required

Inspector _____

PLEASE NOTE: THIS INSPECTION EXPIRES **30 DAYS** AFTER THE INSPECTION DATE LISTED AND MUST BE SIGNED BY A COUNTY OFFICIAL

A VEHICLE INSPECTION ALONE DOES NOT CONSTITUTE THE ISSUANCE OF A LICENSE OR PERMIT

Driver #1 Name _____ **Driver #1 Signature** _____ **Date** _____

Driver #2 Name _____ **Driver #2 Signature** _____ **Date** _____